Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	Part 1: Identify Yourself						
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name						
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your	Dawn First name B. Middle name Duncan Last name and Suffix (Sr., Jr., II, III)		First name Middle name Last name and Suffix (Sr., Jr., II, III)			
	meeting with the trustee.	Last name and Sumx (St., St., II, III)		Last harrie and Julia (Jr., Jr., II, III)			
2.	All other names you have used in the last 8 years						
	Include your married or maiden names.						
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5794					

Del	otor 1 Dawn B. Duncan		Case number (if known)			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		115 Kane Street Apartment-1-B Brooklyn, NY 11231				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Kings County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Deb	otor 1 Dawn B. Duncan					Case number (if known)	
Par	t 2: Tell the Court About	our Bank	cruptcy Ca	ase			
7.	The chapter of the Bankruptcy Code you are				each, see <i>Notice Required by</i> age 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for I	Bankruptcy
	choosing to file under	■ Chap	er 7				
		☐ Chap	ter 11				
		☐ Chap	ter 12				
		☐ Chap	ter 13				
8.	How you will pay the fee	ab ord	out how yo	ou may pay. Typica attorney is submit	ally, if you are paying the fee yo	k with the clerk's office in your local court fo urself, you may pay with cash, cashier's che alf, your attorney may pay with a credit card	eck, or money
						on, sign and attach the Application for Individ	duals to Pay
			•		Official Form 103A). ed (You may request this option	n only if you are filing for Chapter 7. By law,	a iudge mav.
		bu ap	t is not req plies to yo	uired to, waive your family size and	ur fee, and may do so only if yo you are unable to pay the fee ir	ur income is less than 150% of the official p n installments). If you choose this option, you cial Form 103B) and file it with your petition.	overty line that
9.	Have you filed for	■ No.					
	bankruptcy within the last 8 years?	☐ Yes.					
	•		District		When	Case number	
			District		144	0	
			District		When	Case number	
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ No.	Go to I	ine 12.			
		☐ Yes.	Has yo	our landlord obtain	ed an eviction judgment agains	t you and do you want to stay in your reside	nce?
				No. Go to line 12			
				Yes. Fill out <i>Initia</i> bankruptcy petition		Judgment Against You (Form 101A) and file	it with this

Deb	tor 1 Dawn B. Duncan				Case number (if known)	
Part	Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
	business:	☐ Yes.	Name	Name and location of business		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		te & ZIP Code			
	it to this petition.		Chec	k the appropriate bo	x to describe your business:	
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))	
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))	
				None of the above		
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a small business debtor deadlines. If you indicate that you are a small business debtor, you must attach your most recent operations, cash-flow statement, and federal income tax return or if any of these documents do r in 11 U.S.C. 1116(1)(B).		a small business debtor, you must attach your most recent balance sheet, statement of				
	For a definition of small	■ No.	I am r	ot filing under Chap	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code	•	11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Pari	4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention	
	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?		
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?		
	-				Number, Street, City, State & Zip Code	

Debtor 1 Dawn B. Duncan Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Dawn B. Duncan			Case number	(if known)	
Par	t 6: Answer These Ques	tions for Repo	orting Purposes			
	What kind of debts do you have?			umer debts? Consumer debts are define al, family, or household purpose."	ed in 11 U.S.C. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.			
			■ Yes. Go to line 17.			
				ness debts? Business debts are debts the nent or through the operation of the busin		
			No. Go to line 16c.			
			Yes. Go to line 17.			
		16c. S	tate the type of debts you owe	that are not consumer debts or business	debts	
17.	Are you filing under Chapter 7?	□ No. I a	am not filing under Chapter 7.	Go to line 18.		
	Do you estimate that after any exempt property is excluded and	- res.		you estimate that after any exempt prope able to distribute to unsecured creditors?	rty is excluded and administrative expenses	
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?		No			
			l Yes			
18.	How many Creditors do	■ 1-49		□ 1,000-5,000	□ 25,001-50,000	
	you estimate that you owe?	□ 50-99		5001-10,000	50,001-100,000	
		□ 100-199 □ 200-999		☐ 10,001-25,000	☐ More than100,000	
19.	How much do you	\$0 - \$50 ,	000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion	
	estimate your assets to be worth?	□ \$50,001	- \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion	
		□ \$100,00° □ \$500,00°	- \$500,000 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
20.	How much do you	□ \$0 - \$50,	000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion	
	estimate your liabilities to be?	■ \$50,001		□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion	
	to be:	□ \$100,00°	· · ·	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
		□ \$500,00 ²	l - \$1 million	□ \$100,000,001 - \$500 million	iviore than \$50 billion	
Par	t 7: Sign Below					
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.				
				am aware that I may proceed, if eligible, ι f available under each chapter, and I cho		
				pay or agree to pay someone who is not otice required by 11 U.S.C. § 342(b).	an attorney to help me fill out this	
		I request rel	ief in accordance with the chap	pter of title 11, United States Code, speci	fied in this petition.	
		bankruptcy and 3571.	case can result in fines up to \$	ncealing property, or obtaining money or 250,000, or imprisonment for up to 20 ye	property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,	
		/s/ Dawn E Dawn B. D		Signature of Debtor	2	
		Signature of		- J		
		Executed or		Executed on		
			MM / DD / YYYY	MM /	DD / YYYY	

Debtor 1 Dawn B. Duncan		Case	e number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unite	ed States Code, and have e	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter lebtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.			ledge after an inquiry that the information in the
	/s/ DAVID I. PANKIN, ESQ.	Date	June 21, 2016
	Signature of Attorney for Debtor		MM / DD / YYYY
	DAVID I. PANKIN, ESQ.		
	Printed name		
	David I. Pankin, P.C.		
	Firm name		
	48 Willoughby Street		
	Brooklyn, NY 11201-5202		
	Number, Street, City, State & ZIP Code		
	Contact phone 718-243-2444	Email address	info@pankinlaw.com
	2762		
	Bar number & State		

Fill	in this inform	ation to identify your	case:			
Deb	otor 1	Dawn B. Duncan	Middle Name	Last Name		
	otor 2					
	use if, filing)	First Name	Middle Name	Last Name		
Unit	ted States Ban	kruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Cas	e number				□ Chaol	e if this is an
(II KIII	OWII)				_	c if this is an ded filing
Off	ficial For	m 106Sum				
			and Liabilities an	d Certain Statistical Information		12/15
				are filing together, both are equally responsible fe information on this form. If you are filing amend		
				the box at the top of this page.	ieu scrieuu	iles aiter you file
Part	Summa	rize Your Assets				
					Your a	ssets
					Value	of what you own
1.	Schedule A/	B: Property (Official F	Form 106A/B)		\$	0.00
					•	
	1b. Copy line	: 62, Total personal pro	operty, from Schedule A/B		\$	19,246.86
	1c. Copy line	63, Total of all proper	ty on Schedule A/B		\$	19,246.86
Part	t 2: Summa	rize Your Liabilities				
					Your li	abilities
					Amoun	t you owe
2.			Claims Secured by Property	(Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	0.00
0		•		, -	· —	
3.			Unsecured Claims (Official 1 (priority unsecured claim	s) from line 6e of <i>Schedule E/F</i>	\$	21,584.73
	3b. Copy the	e total claims from Pari	2 (nonpriority unsecured cl	aims) from line 6j of Schedule E/F	\$	66,675.05
	.,		` '			1
				Your total liabilities	\$	88,259.78
Part	Summa	rize Your Income an	d Expenses			
4.		our Income (Official F	,		¢	3,099.50
	Copy your co	ombined monthly incon	ne from line 12 of <i>Schedule</i>	<i>I</i>	\$	3,033.30
5.		Your Expenses (Officia onthly expenses from			\$	4,281.00
Part	t 4: Answer	These Questions fo	r Administrative and Stati	stical Records		
_						
6.	-		ler Chapters 7, 11, or 13? It on this part of the form. Cl	neck this box and submit this form to the court with yo	our other sc	hedules.
	■ Yes					
7.		f debt do you have?				
				debts are those "incurred by an individual primarily for g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	☐ Your de		consumer debts. You have	ve nothing to report on this part of the form. Check thi	is box and s	ubmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Dawn B. Duncan Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

5,154.79

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Tota	l claim
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	21,584.73
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	21,584.73

Debtor 1			
	Dawn B. Duncan First Name Middle Name	Last Name	
Debtor 2			
(Spouse, if filing)	First Name Middle Name	Last Name	
United States B	ankruptcy Court for the: EASTERN DISTRICT OF I	NEW YORK	
Case number			☐ Check if this is an amended filing
Official Fo	orm 106A/B		
Schedu	le A/B: Property		12/15
think it fits best. information. If mo Answer every que	Be as complete and accurate as possible. If two married are space is needed, attach a separate sheet to this form.	ce. If an asset fits in more than one category, list the asset people are filing together, both are equally responsible to the top of any additional pages, write your name and You Own or Have an Interest In	for supplying correct
_	have any legal or equitable interest in any residence, bu	uliding, land, or similar property?	
No. Go to Pa			
Yes. Where	is the property?		
Part 2: Describe	e Your Vehicles		
	ase, or have legal or equitable interest in any vehi- rives. If you lease a vehicle, also report it on Schedule	icles, whether they are registered or not? Include a e G: Executory Contracts and Unexpired Leases.	any vehicles you own that
3. Cars. vans. t	rucks, tractors, sport utility vehicles, motorcycles		
	rucks, tractors, sport utility verifies, motorcycles	5	
■ No	rucks, tractors, sport utility verifices, motorcycles	S	
_	rucks, tractors, sport utility verifices, motorcycles	S	
■ No □ Yes 4. Watercraft, a	nircraft, motor homes, ATVs and other recreationa ats, trailers, motors, personal watercraft, fishing vess	al vehicles, other vehicles, and accessories	
■ No □ Yes 4. Watercraft, a	ircraft, motor homes, ATVs and other recreationa	al vehicles, other vehicles, and accessories	
■ No □ Yes 4. Watercraft, a Examples: Bo	ircraft, motor homes, ATVs and other recreationa	al vehicles, other vehicles, and accessories	
■ No □ Yes 4. Watercraft, a Examples: Bo	ircraft, motor homes, ATVs and other recreationa	al vehicles, other vehicles, and accessories	
■ No □ Yes 4. Watercraft, a Examples: Bo ■ No □ Yes 5 Add the doll	ircraft, motor homes, ATVs and other recreationa	al vehicles, other vehicles, and accessories rels, snowmobiles, motorcycle accessories	\$0.00
■ No □ Yes 4. Watercraft, a Examples: Bo ■ No □ Yes 5 Add the doll pages you h	nircraft, motor homes, ATVs and other recreationa ats, trailers, motors, personal watercraft, fishing vessions, perso	al vehicles, other vehicles, and accessories rels, snowmobiles, motorcycle accessories	\$0.00
No Yes 4. Watercraft, a Examples: Bo No Yes 5 Add the doll pages you h	nircraft, motor homes, ATVs and other recreational ats, trailers, motors, personal watercraft, fishing vessor water value of the portion you own for all of your enthance attached for Part 2. Write that number here	al vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories tries from Part 2, including any entries for	\$0.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
No Yes 4. Watercraft, a Examples: Bo No Yes 5 Add the doll pages you h Part 3: Describe Do you own or 6. Household g Examples: No No	lar value of the portion you own for all of your entrave attached for Part 2. Write that number here e Your Personal and Household Items have any legal or equitable interest in any of the poods and furnishings lajor appliances, furniture, linens, china, kitchenware	al vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories tries from Part 2, including any entries for	Current value of the portion you own? Do not deduct secured
No Yes 4. Watercraft, a Examples: Bo No Yes 5 Add the dolipages you here. Part 3: Describe Do you own or 6. Household gexamples: Meaning the series of th	lar value of the portion you own for all of your entrave attached for Part 2. Write that number here e Your Personal and Household Items have any legal or equitable interest in any of the poods and furnishings lajor appliances, furniture, linens, china, kitchenware	al vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories tries from Part 2, including any entries for	Current value of the portion you own? Do not deduct secured

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

■ No

☐ Yes. Describe.....

Official Form 106A/B

Debtor 1	Dawn B. Duncan		Case number (if k	known)
Examp ■ No	ibles of value les: Antiques and figurines; p other collections, memor		oks, pictures, or other art objects; stamp	o, coin, or baseball card collections;
Examp ■ No	musical instruments		bicycles, pool tables, golf clubs, skis; ca	anoes and kayaks; carpentry tools;
10. Firear Exam ■ No		ammunition, and related equipmen	t	
11. Clothe Exam □ No	es	eather coats, designer wear, shoes	, accessories	
	Misc. Cl	othing		\$800.00
□ No			ding rings, heirloom jewelry, watches, g	ems, gold, silver
<i>Exam</i> □ No	arm animals ples: Dogs, cats, birds, horse Describe	5		
	Two Cat	S		\$0.00
■ No	ther personal and househole.		ncluding any health aids you did not	list
		ur entries from Part 3, including a	ny entries for pages you have attache	\$2,900.00
	escribe Your Financial Assets wn or have any legal or equ	itable interest in any of the follow	ving?	Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No		wallet, in your home, in a safe dep	osit box, and on hand when you file you	r petition
			Misc. Cash	\$20.00

De	ebtor 1	Dawn B. D	Duncan		Case number (if know	n)
17.					unts; certificates of deposit; shares in credit unions, brokerag with the same institution, list each.	e houses, and other similar
	□ No ■ Yes				Institution name:	
	_ 100		17.1.	Checking Accou	Bank of America Account # XXXXX-6193	\$10.00
			17.2.	Savings Accoun	Bank of America Account # XXXXX-3360	\$25.00
18.				cly traded stocks ent accounts with brok	kerage firms, money market accounts	
				Institution or issuer na	ame:	
19.		ublicly traded enture	stock and	interests in incorpo	rated and unincorporated businesses, including an inter	est in an LLC, partnership, and
	☐ Yes.	Give specific		about them me of entity:	% of ownership:	
20.	Negoti Non-n ■ No	iable instrume	nts include purents are information	personal checks, cash those you cannot tran	iable and non-negotiable instruments niers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.	
21.		ment or pensi ples: Interests			03(b), thrift savings accounts, or other pension or profit-sharin	ng plans
	■ Yes.	List each acco	•	tely. of account:	Institution name:	
			TIAA		TIAA with Employer	\$16,291.86
22.	Your s		ised deposi	ts you have made so t	that you may continue service or use from a company ublic utilities (electric, gas, water), telecommunications comp	panies, or others
	☐ Yes.				Institution name or individual:	
23.	■ No	`	·		y to you, either for life or for a number of years)	
	☐ Yes			e and description.		
24.				n an account in a qua and 529(b)(1).	alified ABLE program, or under a qualified state tuition p	orogram.
	☐ Yes		Institution r	name and description.	. Separately file the records of any interests.11 U.S.C. § 521((c):
25.	■ No	-			her than anything listed in line 1), and rights or powers e	exercisable for your benefit
26.	Patent		, trademark	s, trade secrets, and	d other intellectual property ds from royalties and licensing agreements	
	■ No □ Yes.	Give specific	information	about them		

D	ebtor 1	Dawn B. Duncan	Case number (if known)	
27		es, franchises, and other general intangibles oles: Building permits, exclusive licenses, cooperative association	holdings, liquor licenses, professional licenses	
	■ No □ Yes.	Give specific information about them		
M	oney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28	. Tax ref	unds owed to you		
	_	Give specific information about them, including whether you alread	ndy filed the returns and the tax years	
29	Examp ■ No	support oles: Past due or lump sum alimony, spousal support, child suppo Give specific information	rt, maintenance, divorce settlement, property settl	ement
30		amounts someone owes you oles: Unpaid wages, disability insurance payments, disability benebenefits; unpaid loans you made to someone else	efits, sick pay, vacation pay, workers' compensation	on, Social Security
	☐ Yes.	Give specific information		
31		ts in insurance policies oles: Health, disability, or life insurance; health savings account (F	ISA); credit, homeowner's, or renter's insurance	
	☐ Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
32	If you	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insone has died.		property because
	■ No □ Yes.	Give specific information		
33	_	against third parties, whether or not you have filed a lawsuit bles: Accidents, employment disputes, insurance claims, or rights	· ·	
	■ No □ Yes.	Describe each claim		
34	Other o	contingent and unliquidated claims of every nature, including	ι counterclaims of the debtor and rights to set	off claims
	☐ Yes.	Describe each claim		
35	■ No	Give specific information		
36		he dollar value of all of your entries from Part 4, including an		\$16,346.86
Pa	art 5: De	scribe Any Business-Related Property You Own or Have an Interest I	n. List any real estate in Part 1.	
37.	Do you	own or have any legal or equitable interest in any business-related pr	operty?	
	■ No. Go	to Part 6.		
	☐ Yes. 0	Go to line 38.		

Debto	or 1	Dawn B. Duncan		Case number (if known)	
Part 6		scribe Any Farm- and Commercial Fishing-Related Property You (ou own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. D	o you	own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No.	Go to Part 7.			
	☐ Yes.	. Go to line 47.			
Part 7	7 :	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
		have other property of any kind you did not already list? bles: Season tickets, country club membership			
	No .	,			
	Yes.	Give specific information			
54. Part 8		he dollar value of all of your entries from Part 7. Write tha List the Totals of Each Part of this Form	t number here		\$0.00
55.	Part 1	: Total real estate, line 2			\$0.00
56.	Part 2	2: Total vehicles, line 5	\$0.00		
57.	Part 3	3: Total personal and household items, line 15	\$2,900.00		
58.	Part 4	l: Total financial assets, line 36	\$16,346.86		
59.	Part 5	5: Total business-related property, line 45	\$0.00		
60.	Part 6	6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	7: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$19,246.86	Copy personal property total	\$19,246.86
63	Total	of all property on Schedule A/B. Add line 55 + line 62			\$19 246 86

Fil	I in this inforn	nation to identify your case:								
	ebtor 1	Dawn B. Duncan								
			Middle Name	L	ast Name					
	ebtor 2 ouse if, filing)	First Name	Middle Name	L	ast Name					
Un	nited States Ba	nkruptcy Court for the: EAS	TERN DISTRICT OF N	EW Y	ORK					
	ase number _					Check if this is an amended filing				
∩	fficial Fo	rm 106C								
			mts / Var. Ola		as Evenent					
<u> </u>	cneaui	e C: The Prope	rty You Cla	um	as Exempt	4/16				
the nee	property you li	sted on Schedule A/B: Property d attach to this page as many c	(Official Form 106A/B)	as yo	our source, list the property that you	or supplying correct information. Using claim as exempt. If more space is additional pages, write your name and				
spe any fun exe	ecific dollar ar applicable st ds—may be u emption to a p	nount as exempt. Alternativel tatutory limit. Some exemption inlimited in dollar amount. Ho	y, you may claim the f ns—such as those for wever, if you claim an	ull fai heal exen	ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu	One way of doing so is to state a ing exempted up to the amount of penefits, and tax-exempt retirement the under a law that limits the t, your exemption would be limited				
Pa	rt 1: Identi	fy the Property You Claim as I	Exempt							
1.	Which set of	nich set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	☐ You are cl	aiming state and federal nonbar	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)					
	You are cl	aiming federal exemptions. 11	U.S.C. § 522(b)(2)							
2			- ,,,,	emnt	fill in the information below.					
					ount of the exemption you claim	Specific laws that allow exemption				
	Schedule A/B	that lists this property	portion you own Copy the value from Schedule A/B	Copy the value from Check only one box for each exemption.						
		ehold Contents	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)				
	Line from Sci	hedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit					
	Misc. Cloth	ning hedule A/B: 11.1	\$800.00		\$800.00	11 U.S.C. § 522(d)(3)				
	Line from Sci	ledule A/B. 11.1			100% of fair market value, up to any applicable statutory limit					
	Misc. Jewe	Iry hedule A/B: 12.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(4)				
	Line from Sci	ledule A/B. 12.1			100% of fair market value, up to any applicable statutory limit					
	Misc. Cash		\$20.00		\$20.00	11 U.S.C. § 522(d)(5)				
	Line from SCI	hedule A/B: 16.1			100% of fair market value, up to any applicable statutory limit					
		Account: Bank of America	\$10.00		\$10.00	11 U.S.C. § 522(d)(5)				
		XXXXX-6193 hedule A/B: 17.1	<u> </u>		100% of fair market value, up to any applicable statutory limit					

Official Form 106C

Del	otor 1 Dawn B. Duncan			Case number (if known)		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim Specific laws that portion you own			Specific laws that allow exemption	
		Copy the value from Check only one box for each exemption. Schedule A/B				
	Savings Account: Bank of America Account # XXXXX-3360	\$25.00		\$25.00	11 U.S.C. § 522(d)(5)	
	Line from Schedule A/B: 17.2		☐ 100% of fair market value, up to any applicable statutory limit			
	TIAA: TIAA with Employer Line from Schedule A/B: 21.1	\$16,291.86		\$16,291.86	11 U.S.C. § 522(d)(10)(E)	
	Lille Hotti Schedule AVB. 21.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cover No Yes	3 years after that for ca	ises fi	,	,	

Fill in this infor					
Debtor 1	Dawn B. Duncan				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT C	F NEW YORK		
Case number					
(if known)					☐ Check if this is an
					amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Official Form 106D

First Name Middle Name Last Name								
Debtor 2 Cipcure #, filing First Name	Fill in this infor	mation to identify your o	case:					
Debtor 2 Scooler I, filling First Name Middle Name Last Name	Debtor 1	Dawn B. Duncan						
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK Check if this is an amended filling		First Name	Middle Name	Last Nam	е			
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK Case number (If known)		First Name	Middle Name	Last Nam	e			
Case number Check if this is an amended filing Check if this is an amended filing and Part 2 for creditors with priority and part 2 for creditors and another		ankruntcy Court for the	FASTERN DISTRICT OF	F NEW YORK				
Check if this is an amended filling Difficial Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 The as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to revecutory contracts or unexpired leases that could result in a claim. Also list executory contracts or unexpired leases that could result in a claim. Also list executory contracts or unexpired leases that could result in a claim. Also list executory contracts or unexpired leases that could result in a claim. Also list executory contracts or unexpired leases (Difficial Form 1066, Do not include any creditors with partially secured claims that are listed in schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the first Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your ame and case number (if known). The part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims is if a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim is is. If a claim has both priority and nonpriority amounts. As much as possible, list the claims in slighabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Priority Creditor's Name 1. Men was the debt incurred? As of the date you file, the claim is: Check all that apply Who incurred the debtr? Check o	Office Otates De	ankruptcy Gourt for the.	<u> </u>	THEW FORK				
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Le as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NoNPRIORITY claims. List the other party to revenue contracts or unseptived leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 106AB) and on schedule C: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims set are listed in otherdule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the str. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your ame and case number (if known). PORT 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2: Yes Yes: List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim is. If a claim has both priority and nonpriority amounts. Ist that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in sliphabetical order according to the creditor's name. If you have more than two priority unsecured claims. If our the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other reditors and another priority Ceditor's Name Internal Revenue Service Last 4 digits of account number 5794 \$12,584.73 \$12,584.73 \$0.00 Priority Creditor's Name 10 MetroTech Center 625 Fulton Street Brooklyn, NY 11201 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Deptor 1 a	Case number							
Difficial Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 The as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to revectory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AIF: Property Official Form 106A/B) and on chedule 0: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the fit. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your ame and case number (if known). 1. Do any creditors where priority unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2.	(if known)						_	
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to recording contracts or unspring claeses that could result in a claim. Also list executory contracts on Schedule AfB. Property (Official Form 106A/B) and on schedule 6: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with hardfull secured claims that are listed in schedule 0: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with the variety of the continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your ame and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority amount Internal Revenue Service Last 4 digits of account number 5794 Septiment Priority Creditors Name 10 Metro Tech Center 625 Fulton Street Brooklyn, NY 11201 As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Contingent Claims for death or personal injury while y							amona	cu ming
is as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to my executory contracts or unexpired leases that could result in a claim. Also list executory contracts or Schedule AB: Property (Official Form 1054/B) and on chedule of Sceedures of Contracts and Unexpired Leases (Official Form 1056, Do not Include any creditors with partially secured claims that are listed in chedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the fact that the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your ame and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim lis. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority amount. Internal Revenue Service Priority Creditor's Name 10 MetroTech Center 625 Fulton Street Brooklyn, NY 11201 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claims: No Defficiency of each of personal injury while you were	Official For	m 106E/F						
the as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to revectory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule Afts: Property (Official Form 106/B) and on chedule 6 Executory Contracts and Unexpired Leases (Official Form 106/B). Do not include any creditors with partially secured claims that are listed in chedule D: Creditor's Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the fact that the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your ame and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim its. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Internal Revenue Service Priority Creditor's Name 10 MetroTech Center (25 Falton Street Edy State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Check if this claim is for a community debt lis the claim is for a community debt list the claim is for a community debt lis the claim for	Schedule E	E/F: Creditors W	ho Have Unsecu	red Claim	S			12/15
Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority and and nonpriority and and secure 2. 2.1 Internal	Schedule G: Exect Schedule D: Credi eft. Attach the Co	utory Contracts and Unexpi itors Who Have Claims Secuntinuation Page to this pag	red Leases (Official Form 10 ured by Property. If more sp	06G). Do not inclu ace is needed, co	ude any cre py the Par	editors with partially s t you need, fill it out, i	ecured claims that a number the entries in	re listed in n the boxes on the
No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claims and show both priority and nonpriority amounts, list that claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Internal Revenue Service Priority Creditor's Name 10 MetroTech Center 625 Fulton Street Brooklyn, NY 11201 Number Street City State Zlp Code When was the debt incurred? When was the debt incurred? As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset? Taxes and certain other debts you owe the government Is the claim subject to offset?		, ,	secured Claims					
Yes.	1. Do any credit	tors have priority unsecured	d claims against you?					
2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Internal Revenue Service Priority Creditor's Name 10 MetroTech Center 625 Fulton Street Brooklyn, NY 11201 Number Street City State Zip Code When was the debt incurred? When was the claim is: Check all that apply Who incurred the debt? Check one. Contingent Debtor 1 only Disputed Type of PRIORITY unsecured claim: Check if this claim is for a community debt is the claim subject to offset? No Other. Specify Other. Specify Claims for death or personal injury while you were intoxicated	☐ No. Go to	Part 2.						
2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Internal Revenue Service Priority Creditor's Name 10 MetroTech Center 625 Fulton Street Brooklyn, NY 11201 Number Street City State Zip Code When was the debt incurred? When was the claim is: Check all that apply Who incurred the debt? Check one. Contingent Debtor 1 only Disputed Type of PRIORITY unsecured claim: Type of PRIORITY unsecured claim: Check if this claim is for a community debt is the claim subject to offset? No Other. Specify Other. Specify Claims for death or personal injury while you were intoxicated	Yes.							
Internal Revenue Service Priority Creditor's Name 10 MetroTech Center 625 Fulton Street Brooklyn, NY 11201 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Total claim Priority amount	identify what to possible, list the	ype of claim it is. If a claim ha he claims in alphabetical orde	s both priority and nonpriority r according to the creditor's na	amounts, list that on the same. If you have n	claim here a	and show both priority a	nd nonpriority amount	ts. As much as
Internal Revenue Service Priority Creditor's Name 10 MetroTech Center 625 Fulton Street Brooklyn, NY 11201 Number Street City State Zlp Code No incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt is the claim subject to offset? In the rank Revenue Service Last 4 digits of account number 5794 S12,584.73 S10.00 \$0.00 \$0.00 \$12,584.73 \$0.00 \$	(For an explar	nation of each type of claim, s	ee the instructions for this forr	n in the instruction	booklet.)			
Priority Creditor's Name 10 MetroTech Center 625 Fulton Street Brooklyn, NY 11201 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No No When was the debt incurred? 2014 When was the debt incurred? 2014 As of the date you file, the claim is: Check all that apply Unliquidated Unliquidated Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify						Total claim	•	
10 MetroTech Center 625 Fulton Street Brooklyn, NY 11201 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? 2014 2014 2014 2014 2014 2014 As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Unliquidated Unliquidated Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated No	2.1 Interna	I Revenue Service	Last 4 digits of	account number	5794	\$12,584.73		
625 Fulton Street Brooklyn, NY 11201 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply Contingent Unliquidated Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify			When was the o	leht incurred?	2014			
Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply Contingent Unliquidated Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify			mon was the	aobt mountou.	2014		-	
Who incurred the debt? Check one. □ Debtor 1 only □ Unliquidated □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Other. Specify □ Other. Specify	Brookl	yn, NY 11201	As of the date :	outile the eleim	in Observ	-11 4b -4b		
□ Debtor 1 only □ Unliquidated □ Debtor 2 only □ Disputed □ Debtor 1 and Debtor 2 only □ Type of PRIORITY unsecured claim: □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Claims for death or personal injury while you were intoxicated □ No □ Other. Specify □ Unliquidated □ Disputed □ Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify □ Unliquidated □ Disputed □ Disputed □ Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated			_	ou file, the claim	is: Check	all that apply		
□ Debtor 2 only □ Disputed □ Debtor 1 and Debtor 2 only □ Type of PRIORITY unsecured claim: □ At least one of the debtors and another □ Domestic support obligations □ Check if this claim is for a community debt Is the claim subject to offset? □ Claims for death or personal injury while you were intoxicated ■ No □ Other. Specify	_		_					
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Other. Specify □ Other. Specify	_	•	'					
□ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify	_	,	-1	TV unsecured cla	aim·			
☐ Check if this claim is for a community debt Is the claim subject to offset? No Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify	_	· · · · · · · · · · · · · · · · · · ·	П		u			
Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify	_							
■ No □ Other. Specify			_					
Other. Specify		subject to offset?	_	•	jury while yo	ou were intoxicated		
			☐ Other. Specif	·	YOS.			

Debtor 1 Dawn B. Duncan		Case number (if know)				
2.2	New York State Department Priority Creditor's Name of Taxation and Finance W A Harriman Campus	Last 4 digits of account number When was the debt incurred?	5794 2014	\$9,000.00	\$9,000.00	\$0.00
	Albany, NY 12227 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all	that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the g	overnment		
	Is the claim subject to offset?	☐ Claims for death or personal inj	ury while you	were intoxicated		
	No	Other. Specify				
	☐ Yes	State taxes	;			
4. L u th	Yes. ist all of your nonpriority unsecured claims in the nescured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other art 2.	laim. For each claim listed, identify wh	at type of cla	im it is. Do not list claims	s already included in	Part 1. If more ation Page of
4.1	American Express	Last 4 digits of account numb	er 3053		Total	\$11,065.00
7.1	Nonpriority Creditor's Name Attn Bankruptcy PO Box 981540 EI Paso, TX 79998	When was the debt incurred?	2002			φ11,003.00
Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.				all that apply		
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsect	red claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a s report as priority claims	eparation ag	reement or divorce that y	ou did not	
	■ No	Debts to pension or profit-sh	aring plans, a	and other similar debts		
	Yes	Other. Specify Credit Ca	ard			

Debt	or 1 Dawn B. Duncan		Case number (if know)	
4.2	American Express	Last 4 digits of account number	7197	\$790.00
	Nonpriority Creditor's Name Attn Bankruptcy PO Box 981540 EI Paso, TX 79998	When was the debt incurred?	2009	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separ	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.3	Ann Taylor Nonpriority Creditor's Name	Last 4 digits of account number	3686	\$300.00
	PO Box 1304 New Haven, CT 06505-1304	When was the debt incurred?	2011	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separe report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card		
4.4	Best Egg/sst Nonpriority Creditor's Name	Last 4 digits of account number	2796	\$16,230.00
	4315 Pickett Rd Saint Joseph, MO 64503	When was the debt incurred?	2014	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separ	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	plans, and other similar debts	
	☐ Yes	■ Other. Specify Personal Lo	pan	

Debt	or 1 Dawn B. Duncan	Case number (if know)					
4.5	Capital One Nonpriority Creditor's Name	Last 4 digits of account number 1914	\$9,320.00				
	Attn Bankruptcy PO Box 30285	When was the debt incurred? 2002					
	Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Credit Card					
4.6	Chase	Last 4 digits of account number 9228	\$15,620.00				
	Nonpriority Creditor's Name Attn Bankruptcy PO Box 15145	When was the debt incurred? 2004					
	Wilmington, DE 19850						
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community debt	☐ Student loans					
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	■ Other. Specify Credit Card					
4.7	Discover	Last 4 digits of account number 5781	\$11,870.00				
	Nonpriority Creditor's Name Attn Bankruptcy PO Box 6103	When was the debt incurred? 2004					
	Carol Stream, IL 60194 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	□ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	\square Debts to pension or profit-sharing plans, and other similar debts					
	□Yes	Credit Card Other. Specify Lawsuit Pending					

Debtor 1 Dawn B. Duncan		Case number (if know)				
4.8	Macys	Last 4 digits of account number 7197	\$800.00			
	Nonpriority Creditor's Name Attn Bankruptcy PO Box 8118	When was the debt incurred?				
	Mason, OH 45040 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Credit Card				
4.9	Mount Sinai Pathology Nonpriority Creditor's Name	Last 4 digits of account number	\$127.16			
	PO Box 5024 New York, NY 10087	When was the debt incurred? 2015				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	-				
	Debtor 1 only	Contingent				
	Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Medical Service				
4.1	NYU Hospitals Center	Last 4 digits of account number 0382	\$261.76			
0	Nonpriority Creditor's Name PO Box 415234	When was the debt incurred? 2015	<u> </u>			
	Boston, MA 02241					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	Contingent				
	Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt	Student loans				
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐Yes	■ Other. Specify Medical Service				

Debtor 1 Dawn B. Duncan				
4.1	Todd B Linden MD	Last 4 digits of account number	9244	\$48.73
	Nonpriority Creditor's Name 594 Broadway Room 310	When was the debt incurred?	2015	
	New York, NY 10012 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No □ Yes	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin ☐ Other. Specify Medical Se	eration agreement or divorce that you did not	
4.1	Westside GI Nonpriority Creditor's Name PO Box 28166	Last 4 digits of account number When was the debt incurred?	1749 2015	\$181.34
	New York, NY 10087 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	aration agreement or divorce that you did not	
	Yes	■ Other. Specify Medical Se	rvice	
4.1	Westside GI Nonpriority Creditor's Name PO Box 28166 New York, NY 10087 Number Street City State Zlp Code	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim	20154	\$61.06
	Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim: aration agreement or divorce that you did not	
	Yes	Other. Specify Medical Se	- ·	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Dawn B. Duncan	Case number (if know)					
Name and Address Forster & Garbus Esqs	On which entry in Part 1 or Part 2 did Line 4.7 of (<i>Check one</i>):	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims				
500 Bi County Blvd PO Box 9030 Farmingdale, NY 11735-9030		■ Part 2: Creditors with Nonpriority Unsecured Claims				
rammiguale, NT 11733-9030	Last 4 digits of account number	4811				
Name and Address Nations Recovery PO Box 620130 Atlanta, GA 30362	On which entry in Part 1 or Part 2 did Line <u>4.3</u> of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
Audita, OA 00002	Last 4 digits of account number	4236				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 21,584.73
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 21,584.73
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 66,675.05
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 66,675.05

ill in this infor	mation to identify your	case:		
Debtor 1	Dawn B. Duncan			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F NEW YORK	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

-	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	0.1,		<u> </u>	2 0000	
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

Official Form 106G

Fill in this inf	ormation to identify your	case.			
Debtor 1	Dawn B. Duncan				
DCDIOI 1	First Name	Middle Name	Last Name		
Debtor 2	- AN	Marin N			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official F	orm 106H				
	le H: Your Cod	ohtore			40/45
Scriedui	e n. Tour Cou	enroi 2			12/15
our name and	d case number (if known). Answer every question you are filing a joint case, o			p of any Additional Pages, write
•	(you alog a jo cace, .	ao not mot ounter opouet		
■ No □ Yes					
		u lived in a community pr , Nevada, New Mexico, Pu			ty states and territories include
■ No. Go	to line 3.				
_		use, or legal equivalent live	with you at the time?		
in line 2 a	ngain as a codebtor only D), Schedule E/F (Officia	if that person is a guaran	tor or cosigner. Make	sure you have listed t	g with you. List the person show he creditor on Schedule D (Officia Schedule E/F, or Schedule G to fi
	umn 1: Your codebtor e, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lir	
Nam	e			Schedule E/F,	
				☐ Schedule G, lir	
Num	ber Street			_	
City	Del Greek	State	ZIP Code		
3.2				☐ Schedule D, lir	ne
Nam	е			☐ Schedule E/F,	
				☐ Schedule G, lir	ne
Num	ber Street			_	
City		State	ZIP Code		

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Fill	in this information to identify your c	ase:							
Del	otor 1 Dawn B. Du	ncan			_				
	otor 2 puse, if filing)				_				
Uni	ted States Bankruptcy Court for the	EASTERN DISTRICT	OF NEW YORK		_				
	se number lown)		-			Check if this is An amende A supplement	ed filing ent showing p		chapter
\bigcirc	fficial Form 1061					13 income	as of the follo	owing date:	
	fficial Form 106l					MM / DD/ Y	YYYY		
5	chedule I: Your Inc	ome							12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. t 1: Describe Employment	ır spouse is not filing wi	ith you, do not inclu	de infori	natio	n about your spe	ouse. If more	space is	needed,
1.	Fill in your employment		Debtor 1			Dobtor 1	or non-filin	a chouse	
	information. If you have more than one job, attach a separate page with information about additional employers.		☐ Employed		■ Employed				
		Employment status	■ Not employed				mployed		
		Occupation				Editor			
	Include part-time, seasonal, or self-employed work.	Employer's name					ones & Con	npany	
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed the	here?				l year		
Par	Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	eport for	any li	ne, write \$0 in the	space. Inclu	de your nor	n-filing
If yo	u or your non-filing spouse have mee space, attach a separate sheet to	ore than one employer, co this form.	ombine the information	n for all e	emplo	yers for that perso	on on the line	s below. If y	you need
						For Debtor 1	For Debto		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$_	0.00	\$	5,500.00	
3.	Estimate and list monthly overt	ime pay.		3.	+\$_	0.00	+\$	0.00	
4.	Calculate gross Income. Add lii	ne 2 + line 3.		4.	\$_	0.00	\$5,	500.00	

Official Form 106I Schedule I: Your Income page 1

Debtor	1 Dawn B. Duncan		Case n	umber (if kno	wn)			
			For [Debtor 1			ebtor 2 or	
С	Copy line 4 here	4.	\$	0.	00	\$	5,500.00	
		•••	· —			·		_
	ist all payroll deductions:	_	•			•		
	Tax, Medicare, and Social Security deductions	5a.	\$		00	\$	1,604.76	_
	b. Mandatory contributions for retirement plans c. Voluntary contributions for retirement plans	5b. 5c.	\$		00	\$	0.00	_
	id. Required repayments of retirement fund loans	5d.	\$ 		00 00	\$	0.00	_
	ie. Insurance	5e.	\$		00	\$	310.74	_
51		5f.	\$		00	\$	0.00	_
5	g. Union dues	5g.	\$		00	\$	38.50	_
5	h. Other deductions. Specify: 401(k)	5h. ⊣	- \$	0.	00	+ \$	330.00	<u> </u>
	Transit Pretax		\$	0.	00	\$	116.50	<u> </u>
6. A	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.	00	\$	2,400.50	<u> </u>
7. C	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.	00	\$	3,099.50	<u> </u>
	List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0-	C			¢.	0.00	
01	monthly net income.	8a. 8b.	\$		00	\$	0.00	_
_	interest and dividends E. Family support payments that you, a non-filing spouse, or a depend regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		\$ \$		00	\$ \$	0.00	_
8	d. Unemployment compensation	8d.	\$		00	\$	0.00	
8	e. Social Security	8e.	\$	0.	00	\$	0.00	_
81	Include cash assistance and the value (if known) of any non-cash assistathat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$		00	\$	0.00	_
	g. Pension or retirement income	8g.	\$		00	\$	0.00	_
81	th. Other monthly income. Specify:	8h.+	- \$	U.	00	+ \$	0.00	<u> </u>
9. A	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.	00	\$	0.0	0
10. C	Calculate monthly income. Add line 7 + line 9.	10. \$		0.00	+ \$	3,099	9.50 = \$	3,099.50
	add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				_			.,
Ir of D	State all other regular contributions to the expenses that you list in Scheduclude contributions from an unmarried partner, members of your household, you ther friends or relatives. So not include any amounts already included in lines 2-10 or amounts that are specify:	our depen		,		•	nedule J. 11. +\$	0.00
V	Add the amount in the last column of line 10 to the amount in line 11. The Vrite that amount on the Summary of Schedules and Statistical Summary of Coupplies						12. \$	3,099.50
								ly income
13. D	Oo you expect an increase or decrease within the year after you file this form. No. Yes. Explain:	orm?						

Official Form 106I Schedule I: Your Income page 2

Fill	in this information	to identify yo	ur case:								
Deb	otor 1 D a	ıwn B. Dun	can				Cł	neck	c if this is:		
200	<u>Da</u>	iwii b. Duii	Call						An amended filing		
	otor 2									ving postpetition cha	apter
(Spo	ouse, if filing)							1	3 expenses as of	the following date:	
Unit	ed States Bankruptcy	/ Court for the:	EASTE	RN DISTRICT OF NE	W YORK			N	MM / DD / YYYY		
	e number nown)										
Of	fficial Form	106J									
So	chedule J:	Your E	Expen	ses							12/15
Be info	as complete and	accurate as space is nee	possible. eded, atta	If two married peop ch another sheet to	ole are filing this form. (together, bo On the top of	oth are e	qua itio	lly responsible fo nal pages, write y	or supplying correct your name and cas	e e
		Your Housel	hold								
1.	Is this a joint ca										
	■ No. Go to line □ Yes. Does De		n a separa	ate household?							
	□ No										
		Debtor 2 mus	t file Offici	al Form 106J-2, <i>Expe</i>	enses for Se	parate House	hold of D	ebto	or 2.		
2.	Do you have de	pendents?	□No								
	Do not list Debtor Debtor 2.	r 1 and	Yes.	Fill out this information each dependent		endent's relation tor 1 or Debtor			Dependent's age	Does dependent live with you?	
	Do not state the				_					□ No	'
	dependents name	es.			Da	ughter			9	Yes	
										□ No	
										☐ Yes	
										□ No	
										☐ Yes	
										□ No □ Yes	
3.	Do your expens			No						□ 163	
	expenses of peo yourself and you			Yes							
Est exp	imate your expen		ur bankrı	y Expenses uptcy filing date unle y is filed. If this is a							
Incl	lude expenses pa	id for with n	on-cash	government assistar	nce if you k	now come					
	ficial Form 106l.)					-			Your expe	enses	
4.	The rental or ho payments and ar			ses for your residen	nce. Include	first mortgage	+ 4.	\$		2,500.00	
	If not included in		. g. 5 an i a 0								
							4.	•		0.00	
	4a. Real estate 4b. Property, h	e taxes nomeowner's	or renter	e incurance			4a. 4b.			0.00	
				pkeep expenses			40. 4c.			0.00 100.00	
				dominium dues			4d.			0.00	
5.				ur residence, such a	as home equ	uity loans		\$		0.00	

\$ 200.00 \$ 0.00 \$ 150.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 100.00 \$ 100.00 \$ 120.00 \$ 120.00 \$ 250.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
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form? ayment to increase or decrease because of
1

Fill in this info	rmation to identify your	case:		
Debtor 1	Dawn B. Duncan	Middle Name	LastNama	
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	EASTERN DISTRICT OF	F NEW YORK	
Case number (if known)				☐ Check if this is an amended filing
	rm 106Dec	ا مدياه المدار منا	Dabtarla Cala	advila a
Declara	tion About a	in individual	Debtor's Scho	edules 12/15
obtaining mon years, or both.		n connection with a bankı		king a false statement, concealing property, or nes up to \$250,000, or imprisonment for up to 20
Did you p	ay or agree to pay some	one who is NOT an attorr	ney to help you fill out bank	ruptcy forms?
■ No				
☐ Yes.	Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sumn	nary and schedules filed wi	ith this declaration and
X /s/ Da	wn B. Duncan		X	
	B. Duncan cure of Debtor 1		Signature of Deb	otor 2
Date	June 21, 2016		Date	

Official Form 106Dec

	in this infor	mation to identify your	ouse.			
Deb	otor 1	Dawn B. Duncan				
Del	otor 2	First Name	Middle Name	Last Name		
	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
	se number _ own)					Check if this is an amended filing
Sta		of Financial		duals Filing for B		4/10
nfo	rmation. If n ber (if know	nore space is needed, n). Answer every ques	attach a separate sheet to	o this form. On the top of an		
1.	What is you	r current marital statu	s?			
	■ Married	I				
	□ Not ma					
2.	During the I	ast 3 years, have you l	ived anywhere other thar	where you live now?		
	■ Na					
	■ No □ Yes. Lis	st all of the places you li	ved in the last 3 vears. Do	not include where you live nov	<i>I</i> .	
		rior Address:	Dates Debtor			Dates Debtor 2
	Debtor 1 P	nor Address:	lived there	Debtor 2 Prior At	iaress:	lived there
	Within the I		er live with a spouse or le		ity property state or territo	
3. state				egai equivalent in a commun evada, New Mexico, Puerto R		ry? (Community property Wisconsin.)
3. state	es and territor	ries include Arizona, Cal		evada, New Mexico, Puerto R		
3. state	No Yes. Ma	ries include Arizona, Cal	ifornia, Idaho, Louisiana, N	evada, New Mexico, Puerto R		
	No Yes. Materitor Yes. Material Did you have Fill in the tot	ries include Arizona, Cal ake sure you fill out Sch in the Sources of Your re any income from em al amount of income you	edule H: Your Codebtors (Codebtors (Codebtor	evada, New Mexico, Puerto R	ico, Texas, Washington and ear or the two previous calc time activities.	Wisconsin.)
Par	No Yes. Materitor Yes. Material Did you have Fill in the tot	ries include Arizona, Cal ake sure you fill out Sch in the Sources of Your re any income from em al amount of income you	edule H: Your Codebtors (Codebtors (Codebtor	evada, New Mexico, Puerto R Official Form 106H). Ing a business during this yeal all businesses, including part	ico, Texas, Washington and ear or the two previous calc time activities.	Wisconsin.)
Par	No Yes. Materitor Yes. Materitor Yes. Materitor Yes. Materitor Expla Did you have Fill in the tot If you are fili No	ries include Arizona, Cal ake sure you fill out Sch in the Sources of Your re any income from em al amount of income you	edule H: Your Codebtors (Codebtors (Codebtor	evada, New Mexico, Puerto R Official Form 106H). Ing a business during this yeal all businesses, including part	ico, Texas, Washington and ear or the two previous calc time activities.	Wisconsin.)
Par	No Yes. Materitor Yes. Materitor Yes. Materitor Yes. Materitor Expla Did you have Fill in the tot If you are fili No	ries include Arizona, Cal ake sure you fill out Sch in the Sources of Your re any income from em al amount of income you ng a joint case and you	edule H: Your Codebtors (Codebtors (Codebtor	evada, New Mexico, Puerto R Official Form 106H). Ing a business during this yeal all businesses, including part	ico, Texas, Washington and ear or the two previous calc time activities.	Wisconsin.)

Official Form 107

5.	Include include and other	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.											
	List each	source and	the gross inc	ome from ea	ch source separ	ately. Do	not include income	e that you lis	sted in line	4.			
	□ No ■ Yes.	Fill in the de	etails.										
				Debtor 1 Sources of Describe b		each (befo	s income from source re deductions and sions)	Describ	r 2 es of inco be below.	me	Gross inco (before dedu and exclusion	uctions	
	r the calendanuary 1 to				etirement \$125,877.70 lithdrawal			0					
Da	rt 3: Lisí	Cortain Pa	yments Vou	ı Made Befo	re You Filed for	r Bankrur	ntcv						
6.		Debtor 1's Neither Deindividual During the No. Yes * Subject	es or Debtor 2 ebtor 1 nor I primarily for a e 90 days befor Go to line 7 List below a paid that contained to adjustment or Debtor 2 of e 90 days befor Go to line 7 List below a include pay	P's debts pri Debtor 2 has a personal, fa ore you filed 7. each credito reditor. Do no payments to at on 4/01/19 or both have ore you filed 7. each credito	imarily consumes primarily consumers primarily consumers amily, or household for bankruptcy, or to whom you part of an attorney for and every 3 years of bankruptcy, or to whom you part of the whom y	er debts? sumer del old purpos did you pa aid a total ents for do this bank ars after th sumer del did you pa	bts. Consumer dese." y any creditor a to of \$6,425* or mor mestic support ob ruptcy case. at for cases filed o	re in one or rolligations, suon or after the	5* or more more paynuch as chil ne date of or more?	e? nents and the d support a adjustment. ou paid that	ne total amoun nd alimony. Als	t you so, do ot	
	Creditor'	s Name an	d Address		Dates of paym	ent	Total amount paid	Amou	nt you Il owe	Was this p	payment for	or	
7.	 Within 1 year before you filed for Insiders include your relatives; any of which you are an officer, directo a business you operate as a sole palimony. No Yes. List all payments to an ir 		general par r, person in o proprietor. 11	tners; relatives o control, or owner	of any gen of 20% o	ent on a debt you eral partners; part r more of their voti	owed anyon tnerships of ing securitie	one who w which you s; and any	are a gene	ral partner; cor agent, includin	ng one for		
	Insider's	Name and	Address		Dates of paym	ent	Total amount paid	Amou	nt you Il owe	Reason fo	r this paymen	nt	
В.	insider? Include pa	lyments on (•	teed or cosi	y, did you make gned by an inside	,,,	ments or transfer			count of a d	debt that bene	efited an	
	Insider's	Name and	Address		Dates of paym	ent	Total amount paid	Amoui sti	nt you Il owe		r this paymen ditor's name	nt	

Official Form 107

Deb	otor 1 Dawn B. Dunc	an		Case number ((if known)				
Par	t 4: Identify Legal Act	tions, Repossessions, a	nd Foreclosures						
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.								
	□ No■ Yes. Fill in the detail	ils							
	Case title Case number		Nature of the case		Status of	Status of the case			
	Discover vs Dawn B. Duncan CV-004811-16		ollection Action	Civil Courts County of Kings	☐ On ap	■ Pending □ On appeal □ Concluded			
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below.								
	Creditor Name and Address		Describe the Property Explain what happened		Date	Value of the property			
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.								
	Creditor Name and Ad	dress De	escribe the action the	creditor took	Date action was taken	Amount			
12.		u filed for bankruptcy, v er, a custodian, or anoth		rty in the possession of an a	assignee for the be	nefit of creditors, a			
Par	t 5: List Certain Gifts	and Contributions							
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No ■ Yes. Fill in the details for each gift.								
	Gifts with a total value per person	•	Describe the gifts		Dates you gave the gifts	Value			
	Person to Whom You Address:	Gave the Gift and							
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No □ Yes. Fill in the details for each gift or contribution.								
	Gifts or contributions more than \$600 Charity's Name Address (Number, Street, C	to charities that total	Describe what you	contributed	Dates you contributed	Value			

Debtor 1		Dawn B. Duncan			Case number (if known)				
Par	t 6:	List Certain Losses							
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?								
		No							
	☐ Yes. Fill in the details.								
	how the loss occurred Includ		Include	ibe any insurance coverage for the loss ethe amount that insurance has paid. List pending noe claims on line 33 of Schedule A/B: Property.		Date of your loss	Value of property lost		
Par	t 7:	List Certain Payments or Transfers	S						
16.	Within	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.							
	□ No								
		Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		'ou	Description and value of any property transferred		Date payment or transfer was made	Amount of payment		
	Law Offices of David I. Pankin, PC 48 Willoughby Street Brooklyn, NY 11201			5/4/2016-5/16/2016 Payments include court fee and counseling fees.		Debtor	\$2,225.00		
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details.								
		Person Who Was Paid Address		Description and value of any property transferred		Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.								
	Person Who Received Transfer Address				iny property or received or debts change	Date transfer was made			
	Person's relationship to you			, ox	J				
19.	benef	n 10 years before you filed for bank ficiary? (These are often called asset No Yes. Fill in the details.		did you transfer any property to a se on devices.)	elf-settled tru	st or similar device	of which you are a		
	Name of trust			Description and value of the property transferred			Date Transfer was made		

Case number (if known)

	List of Oostalia Elizabeth Assessments have		D	- Halfa				
	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.							
	Name of Financial Institution and	Last 4 digits of account number	Type of account o instrument	r Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No							
	☐ Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		cribe the contents	Do you still have it?			
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		cribe the contents	Do you still have it?			
	t 9: Identify Property You Hold or Control for Do you hold or control any property that some for someone. No Yes. Fill in the details.		ude any property yo	u borrowed from, are storing f	or, or hold in trust			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		cribe the property	Value			
	t 10: Give Details About Environmental Infor							
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these	or local statute or regularity and statute or regularity and, soil, surface substances, wastes, or	e water, groundwate r material.	er, or other medium, including	statutes or			
	to own, operate, or utilize it, including disposal sites.							
Rep	ort all notices, releases, and proceedings that	you know about, rega	ardless of when they	occurred.				
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental uni Address (Number, S ZIP Code)		Environmental law, if you know it	Date of notice			

Debtor 1 Dawn B. Duncan

Case number (if known)

25.	Have you notified any governmental unit of a	any release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adm	inistrative proceeding under any envi	ronmental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	11: Give Details About Your Business or C	Connections to Any Business		
27.	Within 4 years before you filed for bankrupto	ey, did you own a business or have an	y of the following connections to any	/ business?
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability compa	any (LLC) or limited liability partnershi	ip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing exe	cutive of a corporation		
	☐ An owner of at least 5% of the voting	or equity securities of a corporation		
	■ No. None of the above applies. Go to Page 1	art 12.		
	☐ Yes. Check all that apply above and fill		S.	
	Business Name	Describe the nature of the business	Employer Identification numbe	r
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security	number or ITIN.
			Dates business existed	
28.	Within 2 years before you filed for bankrupto institutions, creditors, or other parties.	ey, did you give a financial statement t	to anyone about your business? Incl	ude all financial
	■ No □ Yes. Fill in the details below.			
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		

Debtor 1 Dawn B. Duncan

Deptor 1	Dawn B. Duncan		Case number (if known)
Part 12:	Sign Below		
are true a with a bai		false statement, concealing prope	s, and I declare under penalty of perjury that the answers rty, or obtaining money or property by fraud in connection o 20 years, or both.
/s/ Dawı	n B. Duncan		
	. Duncan e of Debtor 1	Signature of Debtor 2	
Date J	une 21, 2016	Date	
Did you a ■ No □ Yes	ttach additional pages to Your Stateme	ent of Financial Affairs for Individu	als Filing for Bankruptcy (Official Form 107)?
Did you p ■ No	ay or agree to pay someone who is not	an attorney to help you fill out ba	nkruptcy forms?
☐ Yes. Na	ame of Person Attach the Bankru	ptcy Petition Preparer's Notice, Decl	aration, and Signature (Official Form 119).

Fill in this infe	emation to identify your				
Debtor 1	mation to identify your Dawn B. Duncan	case:			
Deplor	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	EASTERN DISTRICT C	OF NEW YORK		
Case number					
(if known)					Check if this is an
					amended filing
Official Fo		n for Individu	uals Filing Under	Chapter 7	12/15
	=	pter 7, you must fill out t	this form if:		
_	ve claims secured by yo				
You must file th	is form with the court w ever is earlier, unless th		oired. ile your bankruptcy petition or a for cause. You must also sen		
	eople are filing togethe	r in a joint case, both are	equally responsible for suppl	ying correct information.	Both debtors must
•	and accurate as possib	•	led, attach a separate sheet to	this form. On the top of a	any additional pages,

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 Dawn B. Duncan	Case number (if known)	
name: Description of property securing debt:	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in the information below. Do not list real estate leases. Une You may assume an unexpired personal property lease if the	expired leases are leases that are still in effect; the he trustee does not assume it. 11 U.S.C. § 365(p)(2)	lease period has not yet ended.
Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No

Deb	btor 1 Dawn B. Duncan	Case number (if known)
Par	rt 3: Sign Below	
Und		dicated my intention about any property of my estate that secures a debt and any personal
Und	ler penalty of perjury, I declare that I have in	dicated my intention about any property of my estate that secures a debt and any personal
Und prop	ler penalty of perjury, I declare that I have in perty that is subject to an unexpired lease.	
Und prop	ler penalty of perjury, I declare that I have in perty that is subject to an unexpired lease. /s/ Dawn B. Duncan	x

Fill in this info	rmation to identify your case:					irected	in this form and	in Form
Debtor 1	Dawn B. Duncan		122	2A-1Supp:				
Debtor 2 (Spouse, if filing)				■ 1. There	e is no pres	umption	of abuse	
United States	Bankruptcy Court for the: Eastern District of	New York	_ '	appli	ies will be n	nade un	der <i>Chapter 7</i>	nption of abuse Means Test
Case number (if known)				☐ 3. The N	Neans Test	does no	m 122A-2). ot apply now be but it could ap	
							nded filing	pry later.
Official F	Form 122A - 1			_ 000				
	7 Statement of Your Cur	rent Mor	nthly Inc	ome				12/15
attach a separa case number (it qualifying milita	and accurate as possible. If two married people at te sheet to this form. Include the line number to w f known). If you believe that you are exempted fror ary service, complete and file Statement of Exemp talculate Your Current Monthly Income	hich the addition n a presumption	nal information a of abuse becau	applies. On se you do r	the top of ai	ny additi narily co	onal pages, writensumer debts o	te your name and or because of
1. What is	your marital and filing status? Check one on							
_	narried. Fill out Column A, lines 2-11.	.,.						
☐ Marri	ied and your spouse is filing with you. Fill ou	it both Columns	A and B, lines	2-11.				
■ Marri	ed and your spouse is NOT filing with you.	You and your s	spouse are:					
■ Liv	ring in the same household and are not lega	lly separated. (· Fill out both Co	lumns A ai	nd Blines 2	P-11		
□ Liv pe	ring separately or are legally separated. Fill of enalty of perjury that you and your spouse are leading apart for reasons that do not include evadir	out Column A, lir egally separated	nes 2-11; do no I under nonban	ot fill out Co	olumn B. By w that applie	checki		
101(10A). For the 6 months	verage monthly income that you received from all or example, if you are filing on September 15, the 6-ms, add the income for all 6 months and divide the total of the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 throusult. Do not include	ugh August 3 de any incon	31. If the amo	ount of your	our monthly incon once. For examp	ne varied during le, if both
				Column A Debtor 1	1		nn B or 2 or iling spouse	
	oss wages, salary, tips, bonuses, overtime, eductions).	and commissio	ons (before all	\$	0.00	\$	5,154.79	
	y and maintenance payments. Do not include B is filled in.	payments from	a spouse if	\$	0.00	\$	0.00	
of you of from an and roor	unts from any source which are regularly pa or your dependents, including child support. unmarried partner, members of your household nmates. Include regular contributions from a sp Do not include payments you listed on line 3.	Include regular I, your depender	contributions nts, parents,	\$	0.00	\$	0.00	
5. Net inco	ome from operating a business, profession,							
			tor 1					
	ceipts (before all deductions)	\$ 0.00 -\$ 0.00						
•	and necessary operating expenses thly income from a business, profession, or fare	0.00	Copy here ->	\$	0.00	\$	0.00	
	ome from rental and other real property		оор,			*		
U. INGLINICE	mo nom remai and other real property	Deb	tor 1					
Gross re	ceipts (before all deductions)	\$ 0.00						
	and necessary operating expenses	-\$ 0.00						
•	thly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	0.00	
7. Interest	, dividends, and royalties			\$	0.00	\$	0.00	

Official Form 122A-1

Case number (if known)

					Colui Debte			Column B Debtor 2 o		
8.	Unemployme	ent compensation			\$		0.00	\$	0.00	
	Do not enter t	he amount if you contend that the amoun curity Act. Instead, list it here:	t received was a bene	fit under				*		
		\$	0.	00						
	For your sp	ouse \$		00						
9.	Pension or re	etirement income. Do not include any an the Social Security Act.	nount received that wa	s a	\$		0.00	\$	0.00	
10.		all other sources not listed above. Spe	ecify the source and ar	nount.	*					
	Do not include received as a	e any benefits received under the Social S victim of a war crime, a crime against hu prism. If necessary, list other sources on a	Security Act or paymer manity, or international	nts I or						
					\$		0.00	\$	0.00	
					\$		0.00	\$	0.00	
	Total	amounts from separate pages, if any.		+	\$		0.00	\$	0.00	
11.		ur total current monthly income. Add lin Then add the total for Column A to the to		\$	0.	.00	+ \$_	5,154.79	= \$_	5,154.79
art	2: Determ	nine Whether the Means Test Applies t	o You				J [Total incon	current monthly
	201011									
12.	_	ur current monthly income for the year								
	12a. Copy yo	ur total current monthly income from line	11			Copy	y line 11	here=>	\$	5,154.79
	Multiply	by 12 (the number of months in a year)							х	
	12b. The resu	llt is your annual income for this part of th	e form					12k	D. \$	61,857.48
13.	Calculate the	median family income that applies to	you. Follow these step	os:						
	Fill in the state	e in which you live.	NY							
	Fill in the num	ber of people in your household.	3							
		lian family income for your state and size of applicable median income amounts, go	***************************************				nto inetru		\$	72,074.00
		This list may also be available at the bank		pecineu	iii uie s	separa	ile ilistiu	Clions		
14.	How do the I	ines compare?								
		ine 12b is less than or equal to line 13. One of to Part 3.	n the top of page 1, ch	eck box	1, <i>The</i>	ere is r	no presui	mption of abus	se.	
		ine 12b is more than line 13. On the top on the top of to Part 3 and fill out Form 122A-2.	of page 1, check box 2	, The pr	esump	tion of	abuse is	determined b	y Form 1	22A-2.
art	3: Sign E	selow								
	By signir	ng here, I declare under penalty of perjury	that the information o	n this st	atemen	t and	in any at	tachments is t	rue and o	correct.
	X /s/ Da	awn B. Duncan								
	Dawr	n B. Duncan ture of Debtor 1								
	Date June									
		DD / YYYY								
	If you ch	ecked line 14a, do NOT fill out or file Forr	m 122A-2.							
	If you ch	ecked line 14b, fill out Form 122A-2 and f	ile it with this form.							

Dawn B. Duncan

Debtor 1

Debtor 1	Dawn B. Duncan	Case number (if known)	
		·	

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 12/01/2015 to 05/31/2016.

Debtor 1	Dawn B. Duncan	Case number (if known)
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Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 12/01/2015 to 05/31/2016.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Dow Jones & Company

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$66,628.88 from check dated 11/30/2015. Ending Year-to-Date Income: \$69,878.88 from check dated 12/31/2015.

This Year:

Current Year-to-Date Income: \$27,678.75 from check dated ____5/31/2016 _.

Income for six-month period (Current+(Ending-Starting)): \$30,928.75 .

Average Monthly Income: \$5,154.79.

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendere be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): The above disclosed compensation with any other person unless they are members and associates of my law fit copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy be reperation and filing of any petition, schedules, statement of affairs and plan which may be required; C. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] By agreement with the debtor(s), the above-disclosed fee does not include the following service: The above fee does not include representation in any advesary proceedings or any contested matters, adjournments of the 341a creditors meeting due to non appearance of the debtor, investigations or audits conducted by the U.S. Trustee's Office, representation of debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adve proceeding and preparation and filling of any reaffirmation agreements. The above fee also does not include the disbursements for the court filling fee, credit counseling courses a credit report. CERTIFICATION Lecrify that the	In re	Dawn B. Duncan		Case No.		
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendere be rendered on healt of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept S 1,800.00 Balance Due S 1,800.00 Balance Due Other (specify): The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law fin copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptc; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor and person of the debtor in determining whether to file a petition in bankruptc; c. Representation of the debtor in meeting of creditors and confirmation hearing, and any adjourned hearings thereof; (I) (Other provisions as needed) By agreement with the debtor(s), the above-disclosed fee does not include the following service: The above fee does not include representation in any advesary proceedings or any contested matters, adjournments of the 341a creditors meeting due to non appearance of the debtor, investigations or a audits conducted by the U.S. Trustee's Office, representation of debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adve proceeding. June 21, 2016			Debtor(s)	Chapter	7	
compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendere be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$ 1,800.00 Prior to the filing of this statement I have received \$ 1,800.00 Balance Due \$ 0.00 The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my length of the agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my length or agreed to share the above-disclosed to render legal service for all aspects of the bankruptcy case, including: Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptc. Perparation and filing of any petition, schedules, statement of affairs and plan which may be required; Perparation and filing of any petition, schedules, statement of affairs and plan which may be required; Perparation and filing of any petition, schedules, statement of affairs and plan which may be required; Perparation and filing of any petition, schedules, statement of affairs and plan which may be required; Perparation and filing of any petition in any advessary proceedings or any contested matters, adjournments of the 341a creditors meeting due to non appearance of the debtor, investigations or a udits conducted by the U.S. Trustee's Office, representation of debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adve proceeding and preparation and filing of any reaffirmation agreements. CERTIFICATION Lecrify that the foregoing is a complet		DISCLOSURE OF COMPENSATI	ON OF ATTORN	EY FOR DE	CBTOR(S)	
Prior to the filing of this statement I have received S 1,800.00 Balance Due S 0.00 2. The source of the compensation paid to me was: Debtor Other (specify): 3. The source of compensation to be paid to me is: Debtor Other (specify): 4. In a have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law finction of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed for endering advice to the debtor in determining whether to file a petition in bankrupte; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 6. By agreement with the debtor(s), the above-disclosed fee does not include the following service: The above fee does not include representation in any advesary proceedings or any contested matters, adjournments of the 341a creditors meeting due to non appearance of the debtor, investigations or audicial lien avoidances, relief from stay actions or any other adversariance of the debtor, investigations or audicial lien avoidances, relief from stay actions or any other adversariance of the debtor, investigations or any contested matters, adjournments of the 341a creditors meeting due to non appearance of the debtor, investigations or audicial lien avoidances, relief from stay actions or any other adversariance of the debtor, investigations or adversariance of the court filing fee, credit counseling courses a credit report. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor his bankruptcy proceeding. June 21, 2016 Date Date Date Date Date Price Addornery David I. Pankkin, ESQ. DAVID I. Pankkin, ESQ. DAVID I. Pankkin, P.C. 48 Willoughby S	co	ompensation paid to me within one year before the filing of the p	petition in bankruptcy, or a	agreed to be paid	to me, for services rendered or t	0
Balance Due S 0.00 The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law for copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptc; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; I [Other provisions as needed] By agreement with the debtor(s), the above-disclosed fee does not include the following service: The above fee does not include representation in any advesary proceedings or any contested matters, adjournments of the 341a creditors meeting due to non appearance of the debtor, investigations or audits conducted by the U.S. Trustee's Office, representation of debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding and preparation and filing of any reaffirmation agreements. The above fee also does not include the disbursements for the court filing fee, credit counseling courses a credit report. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor disb bankruptcy proceeding. June 21, 2016 DAVID I. PANKIN, ESQ. John J. PANKIN, ESQ. Jo		For legal services, I have agreed to accept		\$	1,800.00	
2. The source of the compensation paid to me was: ■ Debtor □ Other (specify): 3. The source of compensation to be paid to me is: ■ Debtor □ Other (specify): 4. ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law fire copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptc: b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 6. By agreement with the debtor(s), the above-disclosed fee does not include the following service: The above fee does not include representation in any advesary proceedings or any contested matters, adjournments of the 341a creditors meeting due to non appearance of the debtor, investigations or audits conducted by the U.S. Trustee's Office, representation of debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adve proceeding and preparation and filing of any reaffirmation agreements. The above fee also does not include the disbursements for the court filing fee, credit counseling courses a credit report. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor this bankruptcy proceeding. June 21, 2016 Date Date Daylo I. Pankin, P.C. 48 Willoughby Street Brooklyn, NY 11201-5202 718-243-2444 Fax: 718-243-1144		Prior to the filing of this statement I have received		\$	1,800.00	
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□ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law fire copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy be Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 6. By agreement with the debtor(s), the above-disclosed fee does not include the following service: The above fee does not include representation in any advesary proceedings or any contested matters, adjournments of the 341a creditors meeting due to non appearance of the debtor, investigations or audits conducted by the U.S. Trustee's Office, representation of debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adverproceeding and preparation and filing of any reaffirmation agreements. The above fee also does not include the disbursements for the court filing fee, credit counseling courses a credit report. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor this bankruptcy proceeding. June 21, 2016 Date Isl DAVID I. PANKIN, ESQ.		■ Debtor □ Other (specify):				
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The above fee also does not include the disbursements for the court filing fee, credit counseling courses a credit report. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor this bankruptcy proceeding. June 21, 2016 Date /s/ DAVID I. PANKIN, ESQ. DAVID I. PANKIN, ESQ. Signature of Attorney David I. Pankin, P.C. 48 Willoughby Street Brooklyn, NY 11201-5202 718-243-2444 Fax: 718-243-1144	c. d.	Representation of the debtor at the meeting of creditors and co . [Other provisions as needed] by agreement with the debtor(s), the above-disclosed fee does not The above fee does not include representation is or any contested matters, adjournments of the appearance of the debtor, investigations or audi	onfirmation hearing, and an t include the following ser n any advesary proces 441a creditors meeting its conducted by the U	ny adjourned hear vice: edings g due to non J.S. Trustee's C	Office, representation of the	
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I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor this bankruptcy proceeding. June 21, 2016			sements for the court f	filing fee, credi	t counseling courses and a	I
this bankruptcy proceeding. June 21, 2016 Date /s/ DAVID I. PANKIN, ESQ. DAVID I. PANKIN, ESQ. Signature of Attorney David I. Pankin, P.C. 48 Willoughby Street Brooklyn, NY 11201-5202 718-243-2444 Fax: 718-243-1144		CERT	TIFICATION			
Date DAVID I. PANKIN, ESQ. Signature of Attorney David I. Pankin, P.C. 48 Willoughby Street Brooklyn, NY 11201-5202 718-243-2444 Fax: 718-243-1144			ent or arrangement for pay	ment to me for re	epresentation of the debtor(s) in	
Signature of Attorney David I. Pankin, P.C. 48 Willoughby Street Brooklyn, NY 11201-5202 718-243-2444 Fax: 718-243-1144	Ju	ne 21, 2016				
David I. Pankin, P.C. 48 Willoughby Street Brooklyn, NY 11201-5202 718-243-2444 Fax: 718-243-1144	Da	rte	•	SQ.		
Brooklyn, NY 11201-5202 718-243-2444 Fax: 718-243-1144						
718-243-2444 Fax: 718-243-1144						
info@pankinlaw.com						
Name of law firm			Name of law firm			

United States Bankruptcy Court Eastern District of New York

In re	Dawn B. Duncan		Case No.	
		Debtor(s)	Chapter	7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

/s/ Dawn B. Duncan Date: June 21, 2016 Dawn B. Duncan Signature of Debtor /s/ DAVID I. PANKIN, ESQ. Date: June 21, 2016 Signature of Attorney DAVID I. PANKIN, ESQ.

David I. Pankin, P.C. 48 Willoughby Street Brooklyn, NY 11201-5202 718-243-2444 Fax: 718-243-1144

USBC-44 Rev. 9/17/98 American Express Attn Bankruptcy PO Box 981540 El Paso TX 79998

American Express Attn Bankruptcy PO Box 981540 El Paso TX 79998

Ann Taylor PO Box 1304 New Haven CT 06505-1304

Best Egg/sst 4315 Pickett Rd Saint Joseph MO 64503

Capital One Attn Bankruptcy PO Box 30285 Salt Lake City UT 84130

Chase Attn Bankruptcy PO Box 15145 Wilmington DE 19850

Discover Attn Bankruptcy PO Box 6103 Carol Stream IL 60194

Forster & Garbus Esqs 500 Bi County Blvd PO Box 9030 Farmingdale NY 11735-9030

Internal Revenue Service 10 MetroTech Center 625 Fulton Street Brooklyn NY 11201 Macys Attn Bankruptcy PO Box 8118 Mason OH 45040

Mount Sinai Pathology PO Box 5024 New York NY 10087

Nations Recovery PO Box 620130 Atlanta GA 30362

New York State Department of Taxation and Finance W A Harriman Campus Albany NY 12227

NYU Hospitals Center PO Box 415234 Boston MA 02241

Todd B Linden MD 594 Broadway Room 310 New York NY 10012

Westside GI PO Box 28166 New York NY 10087

Westside GI PO Box 28166 New York NY 10087

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

CASE NO.:.

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Pursuant to Local Bankruptcy Rule 1073-2(b), the debtor (or any other petitioner) hereby makes the following disclosure concerning Related Cases, to the petitioner's best knowledge, information and belief:
[NOTE: Cases shall be deemed "Related Cases" for purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case was pending at any time within eight years before the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are spouses or ex-spouses; (iii) are affiliates, as defined in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a partnership and one or more of its general partners; (vi) are partnerships which share one or more common general partners; or (vii) have, or within 180 days of the commencement of either of the Related Cases had, an interest in property that was or is included in the property of another estate under 11 U.S.C. § 541(a).]
NO RELATED CASE IS PENDING OR HAS BEEN PENDING AT ANY TIME.
☐ THE FOLLOWING RELATED CASE(S) IS PENDING OR HAS BEEN PENDING:
1. CASE NO.: JUDGE: DISTRICT/DIVISION:
CASE STILL PENDING (Y/N): [If closed] Date of closing:
CURRENT STATUS OF RELATED CASE:
(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE:
2. CASE NO.: JUDGE: DISTRICT/DIVISION:
CASE STILL PENDING (Y/N): [If closed] Date of closing:
CURRENT STATUS OF RELATED CASE:
CURRENT STATUS OF RELATED CASE:(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE:
3. CASE NO.: JUDGE: DISTRICT/DIVISION:
CASE STILL PENDING (Y/N): [If closed] Date of closing:

DEBTOR(S): Dawn B. Duncan

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:	
(Disc	harged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to NO	OTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" SCHEDULE "A" OF RELATED CASE:	' ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
<i>NOTE:</i> Pursuant to 11 U.S.C. § 109(g), certain individuals who be eligible to be debtors. Such an individual will be required to	o have had prior cases dismissed within the preceding 180 days may not o file a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTOR	RNEY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New York ((Y/N): <u>Y</u>
CERTIFICATION (to be signed by pro se debtor/petitioner or	debtor/petitioner's attorney, as applicable):
I certify under penalty of perjury that the within bankruptcy ca as indicated elsewhere on this form.	se is not related to any case now pending or pending at any time, except
/s/ DAVID I. PANKIN, ESQ.	
DAVID I. PANKIN, ESQ. Signature of Debtor's Attorney David I. Pankin, P.C. 48 Willoughby Street Brooklyn, NY 11201-5202 718-243-2444 Fax:718-243-1144	Signature of Pro Se Debtor/Petitioner
	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

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